

CLAIMS ONLY						Application Number 10 681940		Filing Date	
						Applicant(s)			
						* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1									
2									
3									
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49									
50									
Total Indep	2								
Total Depend	17								
Total Claims	19								